PART B - FEE(S) TRANSMITTAL seach this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents NOV 0 1 2007 P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRECTION FEE (if required). Blocks 1 through 5 should be completed where appropriate further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 63983 09/28/2007 Certificate of Mailing or Transmission VOLPE AND KOENIG, P.C. NET APP I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 30 S. 17TH STREET UNITED PLAZA, SUITE 1600 PHILADELPHIA, PA 19103 Ge1man (Depositor's name) (Signature) (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/771,613 02/04/2004 Roger Keith Stager ALA-PT011 3439 TITLE OF INVENTION: METHOD AND SYSTEM FOR STORING DATA USING A CONTINUOUS DATA PROTECTION SYSTEM APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$0 \$1700 12/28/2007 EXAMINER 11/05/2007 NNGUYEN2 00000013 10771613 ART UNIT CLASS-SUBCLASS LE, DIEU MINH T 2114 1440.00 OP 714-042000 an an an Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent from page, list 1 3,00 Op Koenig, ¡Volpe and (1) the names of up to 3 registered patent attorneys Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Sunnyvale, CA Network Appliance, Inc. Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🔲 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed.

Publication Fee (No small entity discount permitted) Advance Order - # of Copies _

Payment by credit card. Form PTO-2038 is attached.

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5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 10-29-2001

Registration No. 41,034 Typed or printed name Steven J. Gelman

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FEE TRANSMITTAL For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1743

Complete if Known			
Application Number	10/771,613		
Filing Date	February 4, 2004		
First Named Inventor	Roger Keith Stager		
Examiner Name	Dieu Minh T. Le		
Art Unit	2114		
Attorney Docket No.	NET-P01-2286.01		

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 22-0493 Deposit Account Name: Volpe and Koenig, P.C.							
For the above-identi				· ·			oenig, P.C.
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Charge any a under 37 CFF		e(s) or underpayme 1,17	ents of fee(s	Credi	it any overpay	ments	
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FEE CALCULATION	OII F TO-LUCE	ł.					
1. BASIC FILING, SEAF	PCH AND	EYAMINATION	FEFS				, , , , , , , , , , , , , , , , , , , ,
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Application Type	Fee (\$)	Small Entity Fee (\$)		Small Entity Fee (\$)		Small Entity Fee (\$)	Fees Paid (\$)
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
2. EXCESS CLAIM FEI Fee Description		100	-	v	•	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including F	(eissues)				50	25
Each independent cla	aim over 3 (ues)			210	105
Multiple dependent c		F- > /\$)	5- a D			370	185
<u>Total Claims</u> - 20 or HP =	Extra Clair	ms Fee (\$)	<u>+ee +:</u>	<u>aid (\$)</u> }		Multiple De Fee (\$)	ependent Claims Fee Paid (\$)
HP = highest number of tota	•	_		1		1 66 141	Fee Fall (4)
Indep. Claims - 3 or HP =	Extra Clair		Fee Pa				
- 3 or HP = x = 0 HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50							
sheets or fraction th <u>Total Sheets</u> - 100 =	hereof. See Extra Shee	e 35 U.S.C. 41(a ets <u>Number</u> / 50 =	er of each a	d 37 CFR 1.1 additional 50 c round up to a v	or fraction the		(\$) Fee Paid (\$)
4. OTHER FEE(S) Non-English Specific	cation, \$		•	•		<i>,</i>	Fees Paid (\$)
Other (e.g., late filing surcharge): Issue Fee, Publication Fee, One Advanced Copy					1743.00		

SUBMITTED BY	1 /		
Signature	the bloom	Registration No. (Attorney/Agent) 41,034	Telephone 215-568-6400
Name (Print/Type)	Steven J. Gelman		Date October 29, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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THAI			Application Number	10/771,	613			
ŀ	TRANSMITTAL		Filing Date Februar			ry 4, 2004		
	FORM		First Named Inventor F		Roger Keith Stager			
			Art Unit	2114				
(to	be used for all correspondence after initial	filing)	Examiner Name	Dieu Mi	nh T.	Le		
· · · · · · · · · · · · · · · · · · ·			Attorney Docket Number	NET-PO	ET-P01-2286.01			
		ENC	LOSURES (Check all	that apply)			
V	Fee Transmittal Form		Drawing(s)			After Allowance Communication to TC		
	Fee Attached		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences		
	Amendment/Reply		Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
	After Final		Petition to Convert to a Provisional Application			Proprietary Information		
	Affidavits/declaration(s)		Power of Attorney, Revocatio Change of Correspondence A			Status Letter		
	Extension of Time Request		Terminal Disclaimer		\checkmark	Other Enclosure(s) (please Identify below):		
	Express Abandonment Request		Request for Refund		Form PTOL-85			
	Information Disclosure Statement	📙 '						
		[Landscape Table on CI					
	Certified Copy of Priority Document(s)	Remai	rks		-			
	Reply to Missing Parts/							

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Name	Volpe and Koenig, P.C.					
Signature	MA D					
Printed name	Steven J. Gelman					
Date	October 29, 2007	Reg. No.	41,034			

Incomplete Application

Reply to Missing Parts under 37 CFR 1.52 or 1.53

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